

COURT OF COMMON PLEAS
DIVISION OF DOMESTIC RELATIONS
HAMILTON COUNTY, OHIO
PARENTING SERVICES

Date of Assessment _____

Case No. _____

Date Sent to Mediator _____

File No. _____

CSEA No. _____

Mother's Name _____

Father's Name _____

Address _____

Address _____

Phone: Work: _____

Phone: Work: _____

Home: _____

Home: _____

Occupation _____

Occupation _____

Attorney: _____

Attorney: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Date Action Filed: _____

By Whom: _____

Hearing Date: _____

Purpose of Hearing: _____

Post-Decree: Yes _____ No _____

Date of Marriage: _____

Date of Separation: _____

Who Initiated Separation: _____

Previous Mediation Assessment: _____

Children's Names and Dates of Birth: _____

Mother
Others Living in Household

Father
Others Living in Household

Current living arrangements for children: _____

Issue to be Decided: _____ Parenting Arrangments _____ Visitation Only (third parties)

_____ Other: _____

Problem Statement

Referred on for mediation: Yes _____ No _____